## PART B - FEE(S) TRANSMITTAL

## Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address and indicated unless corrected below of directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or indicated unless corrected below of directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or indicated unless corrected below of directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or indicated unless corrected below of directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or indicated unless corrected below of directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or indicated unless corrected below of directed otherwise in Block 1, by (a) specifying a new correspondence address; and or indicated unless corrected below of directed otherwise in Block 1, by (a) specifying a new correspondence address; and or indicated unless correspondence address and or indicated unles maintenance fee notifications.

OF THE PARTY COMPANYOR	LONG TO STATE OF THE PARTY.		Note: A certificate of mailing can only be used for domestic mailings of t
CURRENT CORRES	PONDENCE ADDRES	SS (Note: Use Block 1 for any change of address)	Fee(s) Transmittal. This certificate cannot be used for any other accompany
			papers. Each additional paper, such as an assignment or formal drawing, m
			have its own certificate of mailing or transmission.
23492	7590	10/08/2010	

PAUL D. YASGER ABBOTT LABORATORIES 100 ABBOTT PARK ROAD DEPT, 377/AP6A ABBOTT PARK, IL 60064-6008

Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sulficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FIE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Kim Gleason (Depositor's name) /Kim Gleason/ (Signature January 10, 2011

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/714,689	11/17/2003	Sheng C. Lou	6755USD1	5738

TITLE OF INVENTION: METHODS FOR THE DETECTION OF HIV-I OR -2 ANTIGENS EMPLOYING MONOCLONAL ANTIBODES THAT RECOGNIZE A SHARED HIV-1/-2 EPITOPE IN THE CAPSID P24/P26 PROTEINS.

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1510	\$300	\$0	\$1810	01/10/2011		
EXAMINER		ART UNIT	CLASS-SUBCLASS	1				
PARKIN, JEFFREY S 1648			435-005000	_				
CFR 1.363).  Change of corresp Address form PTO/S  "Fee Address" inc	lication (or "Fee Address 02 or more recent) attach	inge of Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.		carol Larce era 2 Larcher &	I Audrey L. Bartnicki Carol Larcher; 2 Larcher & Chao Law Group 3		
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)								

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment.

(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

Abbott Laboratories Abbott Park, IL

Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🚨 Corporation or other private group entity 📮 Government 4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

Issue Fee A check is enclosed. Dublication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 01-0025 (enclose an extra copy of this form). Advance Order - # of Copies

5. Change in Entity Status (from status indicated above) □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature / Audrey L. Bartnicki, Reg No. 40,499 Lanuary 10, 2011 Typed or printed name Audrey L. Bartnicki 40,499

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 manates to complete, including gathering, preparing, and within 50 cm and/or suggestion. For excluding gathering, preparing, and within 50 cm and/or suggestion. For excluding this burden, should be sent to the chief Information Officer, U.S. Paters and Trademark Office. U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 2231-450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 2231-450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Registration No.